



**MONTANA DEPARTMENT OF CORRECTIONS
YOUTH COMMUNITY CORRECTIONS
Interview /Photo Consent Form
For Youth Offenders**

I, _____ Youth ID: _____
(please print youth name here)
in response to a request properly made by: _____
(Name/Organization)

grant permission to the above-named requesting party to conduct an interview and record the same both manually and electronically and/or take photographic portraits or pictures, moving pictures, audio/visual recordings, or other imaging according to the box checked below, with the understanding that if I am a youth, no verbal or photographic depictions of me will disclose my identity. I further grant permission to the requesting party and those acting under its authority to copyright, use, and publish for advertising, instruction or any other lawful purpose whatsoever, any statements, in full or in part, made by me during such interview, and any photographic portraits or pictures, moving pictures, audio/visual recordings, or other imaging of me in which I may be included in whole or in part.

I do hereby waive any right I may have to inspect or approve the finished product or the use to which it may be applied; and release the Montana Department of Corrections, its successors and assigns, and all persons acting under its permission or authority, from any liability by virtue of the use and publication of said interview and/or images.

I relinquish and give to the requesting party all right, title, and interest that I may have in the finished product, copies thereof, and materials used in its production; and further grant the requesting party the right to give, sell, transfer, and exhibit said product or any portion, copy or facsimile thereof, for any purpose it deems necessary and proper.

I do further waive all rights that I may have to any claims for payment or royalties in connection with any exhibit, publication, broadcast, or other use of said finished product or portion thereof.

I hereby **CONSENT** to: ☐ **Interview & Imaging** ☐ **Interview Only** ☐ **Imaging Only**

Youth Signature	Date
Legal Guardian	Date
Department, Facility, or Program Official	Date

I hereby **REFUSE**: ☐ **Both Interview and Imaging**

Youth Signature	Date
-----------------	------

This consent to be interviewed, photographed, or filmed becomes invalid 30 days after the date of offender's signature.